PTO/SB/17 (10-07)

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Filective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008				Complete if Known				
						10/724,706-Conf. #1979		
						December 2, 2003 Yoshihisa TSUKADA		
				First Named Inv Examiner Name				
Applicant claims small entity status. See 37 CFR 1.27				4705			-	
				7 0. 0/12		1982-0208P		
TOTAL AMOUNT OF PAYMENT		(\$) 120.00		Attorney Docket No. 1		1982-0200F		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILIN	G FEES	SE	ARCH FEES	EXAMIN	IATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim over 3 (including Reissues)							210	105
Multiple dependent claims				370	185			
I - 40			Fee F	aid (\$) Multiple Depende				ī.
HP = highest number of total claims	X	=			<u>Fee</u>	<u>e (\$)</u> F	ee Paid (<u>\$)</u>
			Eee C	Paid (\$)				_
Indep. Claims			i ec i	aid (\$)				•
HP = highest number of independe	nt claims paid	for, if greater that	n 3.					
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
histings under 37 CFR 1.:					or small en	tity) for each ad	ditional 5	0
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)							Fee	<u>Paid (\$)</u>
100 =/50 =(round up to a whole number) x =								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1251 Extension for response within first month								20.00
Signature (** A # 7% 78) Registration No. (703) 205-8000								
Signature (Attorney/Agent) 32,101						Telephone	(703) 20	JO-8000
Name (Print/Type) Marc S. We	ainer /					Date	N 7 9	2008

